

DOCUMENT RESUME

ED 454 802

HE 034 162

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TITLE Building Bridges: Professional Development Advising Teams.
PUB DATE 1999-03-00
NOTE 6p.; Paper presented at the Annual Meeting of the Association of American Medical Colleges (Kansas City, MO, March 25-28, 1999).
PUB TYPE Reports - Evaluative (142) -- Speeches/Meeting Papers (150)
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Academic Advising; Higher Education; Medical Education; *Medical Students; Peer Counseling; *Professional Development
IDENTIFIERS *Northeastern Ohio Universities College of Medicine

ABSTRACT

Northeastern Ohio Universities College of Medicine began a new advising program called Professional Development Advising Teams (PDAT) in 1996. A small number of students (6 to 8) was grouped with 2 faculty members (medical school based and clinic based) and 1 peer mentor (an advanced year medical student) to make up 1 of 18 advising teams. This study evaluated the new program from the perspectives of faculty, peer mentor, and medical student. All of the participants from one PDAT team were interviewed, and the interviews were recorded and transcribed to identify qualitative themes related to advising. Looking at the program from the points of view of all participants provided a comprehensive picture of the advising relationships that developed over the 3 years of medical school. It was apparent that a continuous advising program of this sort provided opportunities for students and faculty to build bridges between academic and professional knowledge and between personal and professional identity. The bridge serves as an appropriate metaphor for this program. (Contains 10 references.) (SLD)

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**Poster Presentation at Central Group on Educational Affairs,
Association of American Medical Colleges, March 25-28, 1999,
Kansas City, Missouri**

Building Bridges: Professional Development Advising Teams

Denise D. Gibson, M.S.S.A.

Northeastern Ohio Universities College of Medicine

Purpose

Northeastern Ohio Universities College of Medicine began a new advising program called Professional Development Advising Teams (PDAT) in 1996. A small group of first year medical students (6-8) were grouped together with two faculty members (medical school-based and clinical-based) and one peer mentor (an advanced year medical student) to comprise one of eighteen advising teams. These students worked with the same advising team during the duration of their medical school years. The purpose of this research study was to evaluate the new advising program after three years of experiences, from three perspectives: Faculty, Peer Mentor, and Medical Student.

Methods

All of the participants in one Professional Development Advising Team were interviewed regarding their experiences with advising. The interviews with the participants were recorded, transcribed and qualitative themes regarding advising were identified. A comparison of these themes from the three advising perspectives was also identified.

Additional sources of information for triangulation purposes included:

- The number of times the Advising Team met:
 - 11/1/96 (M1 Year Term 1)
 - 2/5/97 (M1 Year Term 2)
 - 5/19/97 (M1 Year Term 3)
 - 11/5/97 (M2 Year Term 1)
 - 4/20/98 (M2 Year Term 3)
 - 2/24/98 (M3 Year Term 2)
- The Amount of Money Spent on Advising Activities - \$500
- Names of Team Members Who Participated in Each Meeting
- Peer Mentor Schedule and List of Activities for 1996/1997

• Peer Group Team Meeting #One	8/30/96	Introduction
• Peer Group Team Meeting #Two	9/16/96	Classes & Professors
• Peer Group Team Meeting #Three	9/23/96	Student Resources
• Peer Group Team Meeting #Four	10/7/96	Study & Time Management
• Peer Group Team Meeting #Five	10/14/96	Stress Management
• Peer Group Team Meeting #Six	11/4/96	Professionalism
• Peer Group Team Meeting #Seven	11/18/96	Term 1 Exams
• Peer Group Team Meeting #Eight	Term 2	Term two Classes & Exams
• Peer Group Team Meeting #Nine	Term 3	Term three Classes & Exams

CONCLUSIONS

Advising From Three Perspectives

Medical Students (N=4)

Academic Advising

Preparation for Classes
Recommended Resources
Preparation for NBME

Personal Advising

Support to/from Classmates
Personal Counseling

Group Similar Students Together

Professional Advising

Transition to Hospital Setting
Fellowship Opportunities
Career Options/Choices

Advising Process

Attend & Participate in Meetings
Open to Advising Relationships
Honesty and Patience

Recommendations

More Meetings with Advisors
Expand Role of Clinical Advisor
Clinical Advisor
Get to Know Students as People

Peer Mentor (N=1)

Encourages Study Habits
Recommends Books/Faculty/Staff
Provides Tutoring

Conveys "You are not alone,"
"You can contact me anytime"

Shares Similarities in Common

Focuses on Patient Care
Shares Fellowship Experiences
Answers Questions

Available for Communication (E-Mail)
Stays on the Same Level
Stresses Team-Work

Provide Feedback about Mentoring
Give Students Chance to Chose Advisors
Continue Providing Funds for Meetings

Faculty Advisors (N=2)

Review Academic Progress
Discuss Time Management
and Stress Management

Include Significant Others
Initiate Counseling at "Key
Points"

Shares Personal Stories

Give Advise and Offer Options
Provide Shadowing/ Fellowship
Professional Consult/Referral

Attends Meetings Regularly
Develop Trusting Relationships
Convey Encouragement

Assist in Scheduling Meetings
Increase Time with
Coordination Between Advisors

Looking at an advising program from the point of view of all participants provided a more comprehensive picture of the advising relationships which developed over the three years of medical school. Comparing the three perspectives of advising with one another provided a more complete evaluation of this new advising program. Understanding advising relationships provided information for program evaluation, and faculty and student development.

Educational Significance

Continuous advising programs, which include academic and clinical faculty, along with peers in the advising role, provide opportunities for students and faculty to build bridges between academic and professional knowledge and between personal and professional identity. It also provides opportunities for students, faculty and staff to learn about the advising process.

The Bridge as Metaphor is used throughout this poster and in this advising program to convey the connections that are made between:

- people (students, medical school faculty, clinical faculty, and staff)
- knowledge (academic, personal and professional)
- identity (student, faculty, professional)
- forms of advising (academic, personal, professional, and process)

The Bridge as Metaphor is apt because it also conveys a connection to the professional literature about advising:

Anderson, Eugene M. Shannon, Anne Lucasse. Toward a conceptualization of mentoring. Journal of Teacher Education. v39 n1 p38-42 Jan-Feb 1988.

Blumberg, Phyllis et al. Medical students and faculty perceptions of importance of academic milestones and markers. Paper presented at the Annual Meeting of the American Educational Research Association (New York, NY, March 1982).

Dunnington, G.L. The art of mentoring. American Journal of Surgery. v171 n 6 p 604-7 June 1996.

Eckenfels, Edward J., Blacklow, M.D., Robert S., & Gotterer, M.D., Ph.D., Gerald S. Medical student counseling: The Rush Medical College Adviser Program. Journal of Medical Education. v59 n7 p573-581 July 1974.

Elam, Carol L. et al. Preparing for medical school and the medical profession: Advice to advisor. NACADA Journal. v16 n2 p34-38 Fall 1996.

Galvez-Hjornevck, Clea. Mentoring among teachers: A review of the literature. Journal of Teacher Education. v37 n1 p6-11 Jan-Feb 1986.

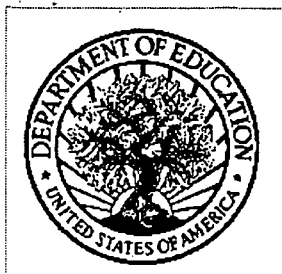
Hayes, Jeannie et al. A support program for freshman medical students. Journal of the Freshman Year Experience. v5 n1 p77-92 1993.

Sistek, Vladimir. Business of coping: Counseling service to medical students. Paper presented at the International Conference on Improving University Teaching (14th, Sweden, June 1988), 13 p.

Woessner, R., Honold, M. Stehle, I., Stehr S., & Steudel, W.E. Faculty mentoring programme—Ways of reducing anonymity. Medical Education. Vol.32, no. 4 (July 1998): 441-443.

Wright, B.V. Being female in medical. Observations of a counselor. Journal of the Florida Medical Association. v83, n7, p498-501, Aug-Sep 1996.

HE034162



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